Physician
Provider Type 64
907 KAR 3:005
907 KAR 3:010

Information about the Program:
- Provider can only be an individual.
- Out-of-state providers may enroll but must be licensed by the state where they practice. The licensing authority for Kentucky is the Kentucky Board of Medical Licensure.
- Both Anesthesiology and Psychiatry require proof of completed residency.
- Providers prescribing buprenorphine for medication assisted treatment related to opioid use treatment, must submit a XDEA Waiver license documenting the number, issued date, and the capacity to prescribe.

New Provider Application, Revalidation and Maintenance Information:
- All provider applications (new enrollment, revalidations, and maintenance items) are now completed using the **KY Medicaid Partner Portal Application** (KY MPPA website).

Supporting Documentation Required for New Provider Enrollment, Revalidation and Maintenance Tasks:
- Physician license (must be current and reflect the requested enrollment date)
- Board Certification for Specialty (pediatrics, internal medicine, etc.) through the American Board of Medical Specialties
- Proof of Residency (if applicable) (must be current and reflect the requested enrollment date)
- XDEA Waiver license (if applicable) (must be current and reflect the requested enrollment date)
- Clinical Laboratory Improvement Amendments (CLIA) certificate (if applicable) (must be current and reflect the requested enrollment date)
- **Copy of Social Security Card – No other forms of verification will be accepted.** If applicant has a Social Security Card stating, "valid for work only" with DHS/INS Authorization, please refer to the additional requirements on the DHS/INS Documentation. A Social Security Card with moniker "not valid for employment" will not be accepted.
- IRS letter of verification of FEIN or official IRS documentation stating FEIN. FEIN must be pre-printed by IRS on documentation. W-9 forms will not be accepted.
- NPI and Taxonomy Code Verification
- If the provider chooses to enroll in direct deposit, verification of the bank routing/accounting numbers, such as voided check or bank letter, is required.

KY Medicaid Partner Portal Application (KY MPPA):

> **Link to Enroll as a Kentucky Medicaid Provider:**
> https://medicaidsystems.ky.gov/Partnerportal/home.aspx and click *Let's Get Started*

> **Link to the Kentucky Medicaid Partner Portal Application (KY MPPA):**
> https://chfs.ky.gov/agencies/dms/dpi/pe/Pages/mppa.aspx
> > Where providers can:
> > - Register for a KY MPPA account
> > - Access KY MPPA training resources
> > - Register for or view pre-recorded webinars
> > - Subscribe to CHFS email for updates
> > - And so much more